National Transportation Safety Board NTSB ID: DEN90FA166 Aircraft Registration Number: N105YV FACTUAL REPORT Occurrence Date: 07/27/1990 Most Critical Injury: None AVIATION Occurrence Type: Accident Investigated By: NTSB Location/Time Nearest City/Place Zip Code Local Time Time Zone State 88345 1030 MDT **RUIDOSO** NM Distance From Landing Facility: 0 Direction From Airport: 0 Airport Proximity: Off Airport/Airstrip Aircraft Information Summary Model/Series Aircraft Manufacturer Type of Aircraft **CESSNA** 208A Airplane Air Medical Transport Flight: No Sightseeing Flight: No Narrative Brief narrative statement of facts, conditions and circumstances pertinent to the accident/incident:

National Transportation Safety Board
FACTUAL REPORT
AVIATION

NTSB ID: DEN90FA166

Occurrence Date: 07/27/1990

| AVIATION | AVIATION Occurren | | | nce Type: Accident | | | | | | | | | | |
|--|---------------------|----------|---------|---|----------------|---------|------|------------------|---------------------|------|------------------------|-------|-------------------|--|
| Landing Facility/Approach Information | | | | | | | | | | | | | | |
| Airport Name Airpo | | | | | Airport Elevat | ion | Run | Runway Used Runw | | | nway Length R | | way Width | |
| | | | | | Ft. | MSL | 0 | | | | | | | |
| Runway Surface Type: | | | | | | | | | | | | | | |
| Runway Surface Condition: | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Type Instrument Approach: NONE | Ē | | | | | | | | | | | | | |
| VFR Approach/Landing: Forced L | anding | | | | | | | | | | | | | |
| Aircraft Information | | | | | | | | | | | | | | |
| Aircraft Manufacturer | | | Mod | | eries | | | | | | Number | | | |
| CESSNA | | | 208 | 3A | | | | | | 2080 | 0105 | 0105 | | |
| Airworthiness Certificate(s): | | | | | | | | | | | | | | |
| Landing Gear Type: Tricycle | | | | | | | | | | | | | | |
| Homebuilt Aircraft? No | | | | | | | | er of En | ngines | : 1 | | | | |
| | | | | Engine Manufacturer: Model/Series: P&W PT6A-114 | | | | | | | Rated Power: 600 HP | | | |
| - Aircraft Inspection Information | | | | | | | | | | | | | | |
| Type of Last Inspection Date | | | | Date of Last Inspection Time Sind | | | | | nce Last Inspection | | | me To | tal Time | |
| Unknown 07 | | | | 07/21/1990 48 Hours | | | | | | urs | 6621 Hours | | | |
| - Emergency Locator Transmitter (| ELT) Information | | | | | | | | | | | | | |
| ELT Installed? Yes ELT Operated? No | | | | ELT Aided in Locating Accident Site? | | | | | | | | | | |
| Owner/Operator Information | | | | | | | | | | | | | | |
| Registered Aircraft Owner | | | | Street Address | | | | | | | | | | |
| | | | | | City | | | | | | | te | Zip Code | |
| Street Address | | | | | | | | | | | | | | |
| Operator of Aircraft 2535 E. 30TH | | | | | | | | | | | | | | |
| MESA AIRLINES | | | | City FARMINGTON | | | | | | | Stat NM | te | Zip Code 87409 | |
| Operator Does Business As: Operator Designator Code: MASA | | | | | | | | | | | | | | |
| - Type of U.S. Certificate(s) Held: | | | | | | | | | | | | | | |
| Air Carrier Operating Certificate(s) | : Commuter Air Ca | arrier | | | | | | | | | | | | |
| Operating Certificate: | | | | | Operator C | ertific | ate: | | | | | | | |
| Regulation Flight Conducted Unde | r: Part 135: Air Ta | ıxi & Co | ommuter | | | | | | | | | | | |
| Type of Flight Operation Conducted | d: Unknown | | | | | | | | | | | | | |
| | ļ | FACTU | JAL REP | OR' | T - AVIATI | ON | | | | | | | Page 2 | |

National Transportation Safety Board

FACTUAL REPORT

AVIATION

NTSB ID: DEN90FA166

Occurrence Date: 07/27/1990

| AVIATION | | | | Occurrence Type: Accident | | | | | 1 | | | | | |
|---|-------------------|----------------|---------------------|---------------------------|-------------------------|----------|-----------|-------------------|--------------------|-----------|------------|----------------|---------------|---------------------|
| First Pilot Information | | | | | | | | | | | | | | |
| Name City | | | | | | | | | | S | tate | Date o | of Birth | Age |
| On File | | | | | | | | | 24 | | | | | |
| Sex: M Seat Occupied: Unknown Principal Profession: Unknown Certificate Number: On File | | | | | | | | | | | | • | | |
| Certificate(s): Airline Transport; Flight Instructor | | | | | | | | | | | | | | |
| Airplane Rating(s): Multi-engine Land; Single-engine Land | | | | | | | | | | | | | | |
| Rotorcraft/Glider/LTA: Helicopter | | | | | | | | | | | | | | |
| Instrument | Rating(s): Helic | copter | | | | | | | | | | | | |
| Instructor Rating(s): | | | | | | | | | | | | | | |
| Type Rating | g/Endorsement fo | or Accident/In | cident Aircra | ft? No | | | С | urrent Bie | nnial Fli | ght Revi | ew? | | | |
| Medical Ce | rt.: Class 1 | Medica | al Cert. Status | s: Valid Me | dicalno w | aivers/l | im. | | Date | of Last I | Medical | Exam: | 05/30/19 | 90 |
| | | ' | | | | | | | | | | | | |
| - Flight Tim | e Matrix | All A/C | This Make and Model | Airplane Single Engine | Airplane Mult-Engine | Nig | ht | Instrum Actual | | ulated | Rotorcraft | | Glider | Lighter Than Air |
| Total Time | | 1697 | 491 | 1541 | 70 | | 121 10 | | 0 | 131 | | | | |
| Pilot In Con | nmand(PIC) | 1572 | | | | | | | | | | | | |
| Instructor | | 761 | | | | | | | | | | \perp | | |
| Last 90 Day | /S | 268 | 263 | | | | | | | | | \perp | | |
| Last 30 Day | | 98 | 98 | | | + | | | _ | | | + | | |
| Last 24 Hou | | 3 | 3 | | | | | . 5 / | | | | | 5 " .0 | |
| Seatbelt Us | sed? Yes | Shou | lder Harness | Used? Yes | | | Toxico | ology Perf | ormed? | No | | second | Pilot? No | |
| Flight Pla | n/Itinerary | | | | | | | | | | | | | |
| | ht Plan Filed: Co | ompany VFI | R | | | | | | | | | | | |
| Departure F | | 1 7 | | | | | State Air | | Airport Identifier | | Depa | Departure Time | | Time Zone |
| EL PASO | | | | | | | TX | ' | | | 0950 | | | MDT |
| Destination | | | | | | | State | Δ | rnort Ide | ntifier | | | | |
| Same as Accident/Incident Location State Airport Identifier SRR | | | | | | | | | | | | | | |
| Type of Clearance: None | | | | | | | | | | | | | | |
| Type of Air | space: | | | | | | | | | | | | | |
| Weather | Information | | | | | | | | | | | | | |
| Source of B | | ord of briefi | ng | | | | | | | | | | | |
| Method of Briefing: | | | | | | | | | | | | | | |
| FACTUAL REPORT - AVIATION Page 3 | | | | | | | | | | | | | | |
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National Transportation Safety Board
FACTUAL REPORT
AVIATION

NTSB ID: DEN90FA166

Occurrence Date: 07/27/1990

Occurrence Type: Accident

| | c1 1 BO. | | | | | | | | | | | | | |
|--|--------------------------|---|---------|-----------|------------|-----------------|---------------------------------|-----------|---------|--|------------------------------|--|--|--|
| Weather | Information | | | | | | | | | | | | | |
| WOF ID | Observation Time | Time Zone | WC | F Elevati | on | WOF D | WOF Distance From Accident Site | | | | Direction From Accident Site | | | |
| SRR | 1040 | MDT | | 7000 Ft. | MSL | | | | 3 NM | | 60 Deg. Mag. | | | |
| | l . | | | | | | | | | | | | | |
| Sky/Lowes | st Cloud Condition: Scar | | | 1(| 0000 Ft. A | AGL | Condition of Light: Day | | | | | | | |
| Lowest Ce | | 0 Ft. AGL | | | ility: | 20 | SM | Alti | meter: | | "Hg | | | |
| Temperature: -18 °C Dew Point: -18 °C Wind Direction: Variable Density A | | | | | | nsity Altitude: | 0 | Ft. | | | | | | |
| Wind Spee | | Weather Condtions at Accident Site: Visual Conditions | | | | | | | | | | | | |
| Visibility (F | RVR): 0 Ft. | Visibility | y (RVV) | 0 | SM | Intensit | y of Precip | oitation: | Unknown | | | | | |
| Restriction | s to Visibility: None | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Type of Pr | ecipitation: None | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Accident | Information | | | | | | | | | | | | | |
| Aircraft Damage: Aircraft Fire: Aircraft Explosion | | | | | | | | | | | | | | |
| Classification: | | | | | | | | | | | | | | |
| - Injury Su | mmary Matrix | Fatal | Serious | Mino | or | None | TOTAL | | | | | | | |
| First Pi | ilot | | | | | 1 | | 1 | | | | | | |
| Second | d Pilot | | | | | | | | | | | | | |
| Studen | nt Pilot | | | | | | | | | | | | | |
| Flight I | nstructor | | | | | | | 7 | | | | | | |
| Check | Pilot | | | | | | | 7 | | | | | | |
| Flight E | Engineer | | | | | | | 7 | | | | | | |
| Cabin / | Attendants | | | | | | | 7 | | | | | | |
| Other (| Crew | | | | | | | 7 | | | | | | |
| Passer | ngers | | | | | 4 | | 4 | | | | | | |
| - TOTAL A | ABOARD - | | | | | 5 | | 5 | | | | | | |
| Other (| Ground | 0 | | 0 | 0 | | | 0 | | | | | | |
| - GRANI | TOTAL - | 0 | | 0 | 0 | 5 5 | | | | | | | | |
| | | | | | | | | | | | | | | |
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| TRANSP- |
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| National Transportation Safety Board |
| 0 7 |
| FACTUAL REPORT |

NTSB ID: DEN90FA166

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|---|-----------------------------|--|
| FACTUAL REPORT | Occurrence Date: 07/27/1990 | |
| FACTUAL REPORT AVIATION | Occurrence Type: Accident | |
| Administrative Information | | |
| Investigator-In-Charge (IIC) | | |
| NORMAN F. WIEMEYER | | |
| Additional Persons Participating in This Accident/Incid | ent Investigation: | |
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